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AMENDMENTS TO THE CLAIMS

Please replace all prior versions and listings of claims in the application with the listing of claims as follows:

Listing of Claims

1-52. (Cancelled)

53. (Currently Amended) A computer-system implemented method for providing a user with a customized healthcare services insurance package, comprising:

receiving a personal information data regarding a user, wherein the personal information data comprises a user identifier and a financial parameter an uncredited umbrella policy cost;

forwarding information regarding a plurality of healthcare service providers, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit;

receiving a selection of a healthcare services panel comprising at least one of the healthcare service providers and a user-defined co-pay amount selected from a provider co-pay range;

aggregating the costs of healthcare service providers on the healthcare services panel;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel;

calculating a difference between the uncredited umbrella policy cost and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost; and

using a computer system to determine a healthcare services insurance package based on a user's selection and the financial parameter; and

forwarding a description of the determined healthcare services insurance package, said description including a proposed periodic payment for purchasing said determined healthcare services insurance package.

54-70. (Cancelled)

71. (Currently Amended) The method of claim 70 53, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit and the personal information data further comprises an uncredited umbrella policy cost, and wherein determining the healthcare services package further comprises:

aggregating the individual costs of each healthcare service provider on the healthcare services panel of each of the plurality of individuals;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel of each of the plurality of individuals; calculating a difference between the uncredited umbrella policy cost and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost.

- 72. (Previously Presented) The method of claim 71, wherein the personal information data further comprises an amount of deductible on an umbrella policy, and wherein determining the healthcare services package is further based on the amount of deductible.
- 73. (Previously Presented) The method of claim 72, wherein the personal information data further comprises an amount of deductible on an umbrella policy for each individual, and wherein determining the healthcare services insurance package is further based on the amounts of deductible.

74-76. (Cancelled)

77. (Currently Amended) A computerized system for providing a user with a customized healthcare services insurance package, comprising:

a memory device; and

a processor disposed in communication with said memory device, said processor configured for:

receiving a personal information data regarding a user, wherein the personal information data comprises a user identifier and a financial parameter an uncredited umbrella policy cost;

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forwarding information regarding a plurality of healthcare service providers, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit;

receiving a selection of a healthcare services panel comprising at least one of the healthcare service providers and a user-defined co-pay amount selected from a provider co-pay range;

aggregating the costs of healthcare service providers on the healthcare services panel;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel;

calculating a difference between the uncredited umbrella policy cost and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost; and

using a computer system to determine a healthcare services insurance package based on a user's selection and the financial parameter; and

forwarding a description of the determined healthcare services insurance package, said description including a proposed periodic payment for purchasing said determined healthcare services insurance package.

78-94. (Cancelled)

95. (Currently Amended) The system of claim 94 ZZ, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit and the personal information data further comprises an uncredited umbrella policy cost, and wherein determining the healthcare services package further comprises:

aggregating the individual costs of each healthcare service provider on the healthcare services panel of each of the plurality of individuals;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel of each of the plurality of individuals;

calculating a difference between the uncredited umbrella policy cost and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost.

- 96. (Previously Presented) The system of claim 95, wherein the personal information data further comprises an amount of deductible on an umbrella policy, and wherein determining the healthcare services package is further based on the amount of deductible.
- 97. (Previously Presented) The system of claim 96, wherein the personal information data further comprises an amount of deductible on an umbrella policy for each individual, and wherein determining the healthcare services insurance package is further based on the amounts of deductible.

98-100. (Cancelled)

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101. (Currently Amended) A processor readable medium storing processor readable instructions for providing a user with a customized healthcare services insurance package, comprising:

processor readable instructions are issuable by a processor for:

receiving a personal information data regarding a user, wherein the personal information data comprises a user identifier and a financial parameter an uncredited umbrella policy cost;

forwarding information regarding a plurality of healthcare service providers, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit;

receiving a selection of a healthcare services panel comprising at least one of the healthcare service providers and a user-defined co-pay amount selected from a provider co-pay range;

aggregating the costs of healthcare service providers on the healthcare services panel;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel;

and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost; and

using a computer system to determine a healthcare services insurance package based on a user's selection and the financial parameter; and

forwarding a description of the determined healthcare services insurance package, said description including a proposed periodic payment for purchasing said determined healthcare services insurance package.

102-118. (Cancelled)

119. (Currently Amended) The medium of claim 118 101, wherein each healthcare service provider is associated with an individual cost and an umbrella policy credit and the personal information data further comprises an uncredited umbrella policy cost, and further comprising:

aggregating the individual costs of each healthcare service provider on the healthcare services panel of each of the plurality of individuals;

aggregating the umbrella policy credits of each healthcare service provider on the healthcare services panel of each of the plurality of individuals;

calculating a difference between the uncredited umbrella policy cost and the aggregated amount of umbrella policy credits, wherein the difference represents a credited umbrella policy cost; and

determining the healthcare services insurance package based on a sum of the aggregated costs and the credited umbrella policy cost.

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120. (Previously Presented) The medium of claim 119, wherein the personal information data further comprises an amount of deductible on an umbrella policy, and wherein determining the healthcare services package is further based on the amount of deductible.

121. (Previously Presented) The medium of claim 120, wherein the personal information data further comprises an amount of deductible on an umbrella policy for each individual, and wherein determining the healthcare services insurance package is further based on the amounts of deductible.

122-124. (Cancelled)